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7590

12/01/2004

Richard J. Minnich

Fay, Sharpe, Fagan, Minnich & McKee, LLP

7th Floor

1100 Superior Avenue

Cleveland, OH 44114-2518

03/03/2005 MWOLDGE 00000034 09865137

01 FC:2501

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Leslie Ann Kuder (Depositor's name)
 (Signature)
 February 28, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/865,137	05/24/2001	Mark P. Wernet	CWR 2 0315	2695

TITLE OF INVENTION: PLANAR PARTICLE/DROPLET SIZE MEASUREMENT TECHNIQUE USING DIGITAL PARTICLE IMAGE VELOCIMETRY IMAGE DATA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	03/01/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BHATNAGAR, ANAND P	2623	382-107000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Benesch, Friedlander,
Coplan & Aronoff LLP

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Case Western Reserve University

Cleveland, Ohio

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

4b. Payment of Fee(s):

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2051 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date February 28, 2005

Typed or printed name Todd L. Sladek

Registration No. 53,768

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